

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Jeff Johnson  
2000 Interstate Park Drive  
Suite 204  
Montgomery, AL 36109

A. Signature 	<input type="checkbox"/> Agent
<input checked="" type="checkbox"/> Addressee	
B. Received by (Printed Name)	C. Date of Delivery 11-20-05
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
<p>Q:USC1040-T SAC (20)</p>	
3. Service Type	
<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

2. Article Number  
(Transfer from service label)

7004 1160 0003 5811 1017

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540